

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

ADDRESS (number and street) ▼

2150 RIVER PLAZA DR. #150

☐ Check if different than previously reported. (ACC)

SACRAMENTO

CA

95833

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00514224

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

05

01

2016

05

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DAVID BAUER

Signature of Treasurer

DAVID BAUER

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

06

10

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
05 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		14486.55
(b) Cash on Hand at Beginning of Reporting Period.....	13976.55	
(c) Total Receipts (from Line 19)	95000.00	95200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	108976.55	109686.55
7. Total Disbursements (from Line 31)	78935.70	79645.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30040.85	30040.85
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	22955.21	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	95000.00	95000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	95000.00	95000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	95000.00	95000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	200.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	95000.00	95200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	95000.00	95200.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8233.38	8943.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8233.38	8943.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	70702.32	70702.32
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	78935.70	79645.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78935.70	79645.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	95000.00	95000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	95000.00	95000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	8233.38	8943.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	200.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	8233.38	8743.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

Full Name (Last, First, Middle Initial)

A. . SANTA YNEZ BAND OF

Mailing Address P. O. BOX 517

City	State	Zip Code
SANTA YNEZ	CA	93460

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOVEREIGN NATION

Occupation

INDIAN TRIBE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	20	/	2016

Transaction ID : INCA147

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. . UNITED AUBURN INDIAN COMMUNITY

Mailing Address 455 CAPITOL MALL #600

City	State	Zip Code
SACRAMENTO	CA	95814

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOVEREIGN NATION

Occupation

INDIAN TRIBE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	23	/	2016

Transaction ID : INCA151

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. . PICAYUNE RANCHERIA OF THE CHUK

Mailing Address 46575 RD. 417

City	State	Zip Code
COARSEGOLD	CA	93614

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOVEREIGN NATION

Occupation

INDIAN TRIBE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	24	/	2016

Transaction ID : INCA157

Amount of Each Receipt this Period

25000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

Full Name (Last, First, Middle Initial)

A. . FOREST COUNTY POTAWATOMI ACTIO

Mailing Address 7 N. PINCKEY ST. #300

City	State	Zip Code
MADISON	WI	53703

FEC ID number of contributing federal political committee.

C

Name of Employer
SOVEREIGN NATION

Occupation
INDIAN TRIBE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 26 / 2016

Transaction ID : INCA158

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. . COLUSA INDIAN COMMUNITY COUNCI

Mailing Address 3730 HIGHWAY 45

City	State	Zip Code
COLUSA	CA	95932

FEC ID number of contributing federal political committee.

C

Name of Employer
SOVEREIGN NATION

Occupation
INDIAN TRIBE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 27 / 2016

Transaction ID : INCA162

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

95000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

Full Name (Last, First, Middle Initial)

A. WAYNE JOHNSON AGENCY

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833
Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 24 2016
Transaction ID : EXPB156

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DAVID BAUER

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833
Purpose of Disbursement
ACCOUNTING SVC.

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 26 2016
Transaction ID : EXPB159

Amount of Each Disbursement this Period

130.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GATEWAY MEDIA

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833
Purpose of Disbursement
VIDEO PRODUCTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 26 2016
Transaction ID : EXPB160

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8130.00

8130.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 12

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GATEWAY MEDIA

Nature of Debt (Purpose):

MASS MAIL

Mailing Address 2150 RIVER PLAZA DR. #150

City State

Zip Code

SACRAMENTO

CA

95833

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD164

Amount Incurred This Period

95.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

95.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GATEWAY MEDIA

Nature of Debt (Purpose):

MASS MAIL FOR LAMALFA

Mailing Address 2150 RIVER PLAZA DR. #150

City State

Zip Code

SACRAMENTO

CA

95833

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD165

Amount Incurred This Period

22860.10

Payment This Period

0.00

Outstanding Balance at Close of This Period

22860.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

22955.21

2) **TOTALS** This Period (last page this line number only)..... ►

22955.21

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

22955.21

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 10 OF 12
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP			FEC IDENTIFICATION NUMBER ▼ C C00514224	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee GATEWAY MEDIA			<input type="checkbox"/> Memo Item	
Mailing Address 2150 RIVER PLAZA DR. #150			Date of Public Distribution/Dissemination 05 / 20 / 2016	
City SACRAMENTO		State CA	Zip Code 95833	Amount 19115.00
Purpose of Expenditure PHONEBANKS		Category/Type 004		Transaction ID : PDTE10 Date of Disbursement or Obligation 05 / 20 / 2016
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		93657.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee GATEWAY MEDIA			<input type="checkbox"/> Memo Item	
Mailing Address 2150 RIVER PLAZA DR. #150			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City SACRAMENTO		State CA	Zip Code 95833	Amount 1500.00
Purpose of Expenditure RADIO ADVERTISING		Category/Type 004		Transaction ID : PDTE11 Date of Disbursement or Obligation 05 / 23 / 2016
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		93657.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....			20615.00	
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
DAVID BAUER		[Electronically Filed]		Date 06 / 10 / 2016
Signature				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 12
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00514224 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee GATEWAY MEDIA		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 24 / 2016</div> </div>	
Mailing Address 2150 RIVER PLAZA DR. #150		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">21467.00</div>	
City SACRAMENTO	State CA	Zip Code 95833	Transaction ID : EDTEALC15
Purpose of Expenditure ONLINE ADVERTISING	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation MM / DD / YYYY 05 / 24 / 2016
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">93657.53</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee GATEWAY MEDIA		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 27 / 2016</div> </div>	
Mailing Address 2150 RIVER PLAZA DR. #150		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">95.11</div>	
City SACRAMENTO	State CA	Zip Code 95833	Transaction ID : PDTE12
Purpose of Expenditure ONLINE ADVERTISING	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2016
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">93657.53</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">21467.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DAVID BAUER

[Electronically Filed]

Signature

Date

 MM / DD / YYYY
 06 / 10 / 2016

Full Name of Payee GATEWAY MEDIA		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2016	
Mailing Address 2150 RIVER PLAZA DR. #150				Amount 28620.32	
City SACRAMENTO	State CA	Zip Code 95833	Transaction ID : EDTEALC16		
Purpose of Expenditure MASS MAIL		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2016	
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate	District: 01 State: CA
Calendar Year-To-Date Per Election for Office Sought		93657.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee GATEWAY MEDIA		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address 2150 RIVER PLAZA DR. #150			Amount <div> <div></div> <div>22860.10</div> </div>	
City SACRAMENTO	State CA	Zip Code 95833	Transaction ID : PDTE13 Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Purpose of Expenditure MASS MAIL		Category/ Type 004		
Name of Federal Candidate DOUG LAMALFA		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: CA
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>93657.53</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	28620.32
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	70702.32

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature